

# Tumor necrosis factor- $\alpha$ and acute-phase proteins in early pregnant ewes after challenge with peptidoglycan-polysaccharide

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## Abstract

Bacterial infection shortly after mating interferes with establishment of pregnancy. Injection of peptidoglycan-polysaccharide (PG-PS), a component of gram-positive bacteria, into sheep on day 5 after mating reduces pregnancy rate. Experiments were designed to evaluate the acute-phase response (APR) in ewes to injection of PG-PS on day 5 after mating (day 0). Catheters were inserted into the jugular and posterior vena cava on day 4. On day 5, ewes were challenged with saline or 30  $\mu\text{g/kg}$  body weight (BW) PG-PS (Exp 1) or 60  $\mu\text{g/kg}$  BW PG-PS (Exp 2). Blood samples were collected every 15 min for 6 h (Exp 1) and every 15 min for 2 h, hourly for 12 h, and at 24, 36, and 48 h (Exp 2). Body temperature and clinical signs of infection were monitored in Exp 2. Plasma was assayed for concentrations of a pro-inflammatory cytokine, tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ); 2 APR proteins, serum amyloid A (SAA) and haptoglobin (Hp); and progesterone ( $P_4$ ). Ewes injected with 60  $\mu\text{g/kg}$  BW PG-PS exhibited fever, vaginal discharge, loss of appetite, and lethargy. After challenge with either 30  $\mu\text{g/kg}$  or 60  $\mu\text{g/kg}$  BW PG-PS, TNF- $\alpha$  increased in the posterior vena cava. Concentrations of SAA and Hp in the jugular increased after challenge with 60  $\mu\text{g/kg}$  BW PG-PS. Only half (5/10) of the ewes treated with 60  $\mu\text{g/kg}$  BW PG-PS had ultrasonically visible embryos, and none of them had functional corpora lutea (CL) ( $<1$  ng/mL of  $P_4$ ) on day 21. On the other hand, 8/9 (88.9%) control ewes had visible embryos and all had functional CL on day 21. Using logistic regression, pregnancy on day 21 was predicted to depend on concentrations of TNF- $\alpha$  and Hp on day 5 and concentration of  $P_4$  on day 14. In summary, injection of PG-PS on day 5 after mating resulted in fever; increased concentrations of TNF- $\alpha$ , Hp, and SAA on the day of and the day after the PG-PS challenge; and decreased concentrations of  $P_4$  on days 14 and 21. These factors were related to failure to establish pregnancy.

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## 1. Introduction

Occurrence of mastitis during early embryonic development interferes with establishment of pregnancy and extends days open in dairy cattle [1]. Because

immunization to peptidoglycan-polysaccharide (PG-PS) or whole killed *Streptococcus pyogenes*, gram-positive bacteria, did not improve establishment of pregnancy after a challenge on day 5 after mating (day 0) in ewe lambs, even though IgG anti-PG-PS titers were high [2], the innate immune system might have a more important role than the humoral. Bacteria stimulate macrophages and monocytes [3] to release pro-inflammatory cytokines, including tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ), leading to the acute-phase response (APR). The APR is defined by secretion of fibrinogen,

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serum amyloid A (SAA), haptoglobin (Hp),  $\alpha$ -1 acid glycoprotein, and C-reactive protein, principally by the liver [4]. Increased production of TNF- $\alpha$ , induced by injection of lipopolysaccharide (LPS), a component of the cellular wall of gram-negative bacteria, was associated with failure to establish pregnancy [5]. Injection of peptidoglycan-polysaccharide (PG-PS), a component of the cell wall of gram-positive bacteria, on day 5 to naturally mated ewes reduced conception rates [6].

The primary objective of this study was to validate induction of an innate immune response after challenging day 5 pregnant ewes with PG-PS. Changes in concentrations of TNF- $\alpha$ , a pivotal pro-inflammatory cytokine, in venous blood draining the reproductive tract and in the systemic circulation, and in systemic profiles for 2 APR proteins, SAA and Hp, were measured and associated with establishment of early pregnancy.

## 2. Materials and methods

### 2.1. Animals

Suffolk ewes (~80 kg body weight [BW]) were used under an approved institutional animal care protocol (WVU IACUC #9801-05). Ewes were fed corn silage and haylage twice daily and had ad libitum access to fresh water. Estrus was synchronized [7] in 2 consecutive breeding seasons (Exp 1 and Exp 2) and detected by vasectomized rams with marking harnesses (one ram/12 ewes). On the third day after ram introduction, the unmarked ewes (expected to be  $\geq$  day 4 of the estrous cycle) were injected with prostaglandin F $_{2\alpha}$  (PGF $_{2\alpha}$ ) i.m.,  $2 \times 5$  mg, 3 h apart (Lutalyse, Upjohn-Pharmacia, Kalamazoo, MI). After the second injection of PGF $_{2\alpha}$ , intact rams with marking harnesses were placed with these ewes for mating. This mating scheme routinely achieves 60%–80% conception rates [7].

In Exp 1 ( $n = 10$ ) and in Exp 2 ( $n = 20$ ), ewes that were mated at least twice (first mating = day 0 of gestation) were assigned at random to 1 of 2 groups, control or PG-PS (100P PG-PS, BD Lee Laboratories, Grayson, GA)]. On day 4, ewes in Exp 1 were sedated with diazepam (0.3 mg/kg BW i.v.; Hoffmann-La Roche Inc., Nutley, NJ) and those in Exp 2 were sedated with diazepam and ketamine HCl (0.7 mg/kg BW; Phoenix Pharmaceuticals, Inc., Mountain View, CA); ewes were then anesthetized using isoflurane or halothane gas via an intratracheal tube. The right hock was shaved, scrubbed with Betadine (The Perdue-Frederick Co., Stamford, CT), and treated locally with lidocaine (Butler Company, Columbus, OH). The skin was tented using forceps and slit longitudinally approx-

imately 1 cm using sterile surgical blades (Propper Manufacturing Co., Inc., Long Island City, NY). The saphenous vein, located about 3 cm lateral to the Achilles tendon, was isolated by blunt dissection and incised. A polyvinyl catheter (id 0.040" and od 0.070") was passed into the saphenous vein for 50 (Exp 1) or 55 cm (Exp 2) to sample the posterior vena cava draining the reproductive tract [8]. Catheters were flushed with 2 mL of heparinized saline (250 U heparin [Sigma, Atlanta, GA]/mL of 0.9% NaCl) and capped with a removable plug. The catheter site was closed with suture, dressed with Furazolidone (Veterinary Products Laboratories, Phoenix, AZ), covered with sterile gauze, and wrapped with 3M Vetrap bandaging tape (Minnesota Mining Mfg, St. Paul, MN). A venous catheter (18-gauge, 8-inch; I-CATH; Charteredmed, Inc., Lakewood, NJ) was placed in the right jugular vein. The area was treated topically with Furazolidone, covered with gauze, and wrapped with Vetrap.

### 2.2. Treatment groups

Ewes were housed in groups of 5 ewes per outdoor barn pen (~7 °C, Exp 1) or 2 ewes per pen in an enclosed facility (~20 °C, Exp 2). On day 5 after mating, ewes were injected (left jugular) with 30  $\mu$ g/kg BW PG-PS ( $n = 6$ , 30  $\mu$ g/kg for 80-kg sheep is equivalent to 2.4 mg of rhamnose/ewe) or 0.9% NaCl (control,  $n = 4$ ) in Exp 1 or with 60  $\mu$ g/kg PG-PS ( $n = 10$ , 60  $\mu$ g/kg for 80-kg sheep is equivalent to 4.8 mg of rhamnose/ewe) or control ( $n = 10$ ) in Exp 2. When compared to saline injection, these doses resulted in fewer pregnancies when ewes were injected on day 5 [6]. In Exp 1, blood samples were collected from each catheter prior to and every 15 min for 6 h after treatment into heparinized, chilled tubes and kept on ice until centrifuged. In Exp 2, samples were collected into EDTA-treated tubes prior to and every 15 min for 120 min, every hour for 12 h, and every 12 h until 48 h. Aliquots of plasma were stored at -20 °C. On days 14 and 21 of Exp 2, jugular samples were collected into EDTA-treated tubes for measuring concentrations of P $_4$ ; animals with concentrations above 1 ng/mL were deemed to be pregnant [9]. In addition, transrectal ultrasonography on day 21 was used to visualize pregnancy using a 7.5-MHz transducer (Corometrics Medical Systems, Inc., Wallingford, CT) and an Aloka 500 ultrasound console (Corometrics) [10]. One control ewe from Exp 2 was diagnosed with pneumonia on day 21 and was excluded from the experiment. Body temperatures were monitored with a rectal thermometer, and behavior and/or physical appearances were recorded every 12 h.

### 2.3. Plasma analysis

Concentrations of TNF- $\alpha$  in duplicate plasma samples (100  $\mu$ L) were determined by radioimmunoassay [11] with intra-assay CV <10% for Exp 1 and <7% for Exp 2. The minimal detectable quantity of recombinant bovine TNF- $\alpha$  (Ciba Geigy GmbH, St. Aubin, Switzerland) corresponded to 7 pg/tube, whereas typical recovery of nonlabeled TNF- $\alpha$  added to bovine plasma averaged 97.4%. A multi-species SAA solid-phase enzyme-linked immunosorbent assay (ELISA) kit (Biosource International, Inc., Camarillo, CA) was used in Exp 2 on samples that were diluted 1:3000. The assay had a sensitivity of 0.3  $\mu$ g/mL and intra-assay CV of 9.8%. Concentrations of Hp were determined using multi-species Hp colorimetric kits (Phase Range, Tri-Delta Diagnostics, Inc., Morris Plains, NJ) in duplicate samples diluted 1:3 with sensitivity of 0.05 mg/mL and intra-assay CV of 6.9%. All ELISA plates were analyzed using SPECTRAmax PLUS<sup>384</sup> and Softmax PRO software, version 4.6 (Molecular Devices Corporation, Sunnyvale, CA, 2003) at an optical density of 450 nm. Concentrations of P<sub>4</sub> on days 14 and 21 were assayed using a validated radioimmunoassay [12] with assay sensitivity of 0.20 ng/mL and intra-assay and inter-assay CV of 7% and 14.8%, respectively.

### 2.4. Statistical analysis

Continuous data for body temperature and for concentrations of TNF- $\alpha$ , SAA, and Hp were analyzed using the repeated-measures analysis of variance (ANOVA) of the PROC MIXED procedure of SAS, version 9.1.3 (SAS Institute, Inc., Cary, NC, 2004). Concentrations of P<sub>4</sub> were analyzed using ANOVA and multiple-comparison tests. The categorical data, such as the incidence of lethargy, vaginal discharge, loss of appetite, and pregnancy rate, were analyzed with the Fisher exact test using the Contingency Analysis platform of JMP version 6.0 (SAS, 2005). Logistic regression (PROC GENMOD, link = logit; SAS) was used to predict the success of pregnancy based on the concentrations of SAA, Hp, and TNF- $\alpha$  on days 5–6, and P<sub>4</sub> on days 14 and 21. Significance was determined for *P* values less than 0.05.

## 3. Results

### 3.1. TNF- $\alpha$

The pro-inflammatory cytokine TNF- $\alpha$  was measured in samples from both the vena cava and the jugular vein. In Exp 1, 30  $\mu$ g/kg BW PG-PS increased

(*P* = 0.002) concentrations of TNF- $\alpha$  in the vena cava within the first 2 hours after injection (Fig. 1A). Concentrations of TNF- $\alpha$  in the jugular vein did not differ (*P* > 0.05) between treated and control ewes (Fig. 1B). Likewise, in Exp 2, treatment with 60  $\mu$ g/kg BW PG-PS resulted in higher concentrations of TNF- $\alpha$  in the vena cava (*P* = 0.003) than in the jugular vein (Fig. 1C). A sustained (*P* = 0.006) increase, expressed as the percent change from hour 0 (Fig. 1D), in concentrations of TNF- $\alpha$  in samples from the jugular vein in PG-PS-treated ewes lasted up to 12 h after PG-PS injection but was similar to control values at 24 h.

### 3.2. Acute-phase proteins

Concentrations of SAA for ewes treated with 60  $\mu$ g/kg BW PG-PS differed (*P* < 0.001) from those in controls, with up to a 5-fold increase compared to baseline values (Fig. 2A). The increased concentration of SAA in treated ewes persisted through 24 h after PG-PS injection. Concentrations of Hp in ewes began to increase at 1 h after treatment with 60  $\mu$ g/kg BW PG-PS and continued to increase through 24 h (Fig. 2B). An effect of time (*P* = 0.003) was detected in addition to an effect of treatment (*P* < 0.001), with concentrations increasing in PG-PS ewes but not control ewes.

### 3.3. Fever and clinical signs of inflammation

Ewes treated with PG-PS (*n* = 10) had their highest body temperature at 12 h after treatment, whereas body temperatures in control ewes (*n* = 10) remained unchanged (Fig. 3). Body temperature was still elevated in PG-PS-treated ewes at 24 h when compared to control ewes (treatment-by-time interaction, *P* < 0.001). Beginning about 3 hours after the injection of PG-PS, challenged ewes had a muco-purulent vaginal discharge, which persisted for 24 h and cleared to a watery discharge by 48 h. The discharge was observed in all treated ewes but was not observed in control ewes (*P* < 0.001). Lethargy and loss of appetite were not observed in control ewes, but lethargy was observed in 4 PG-PS-treated ewes (*P* = 0.05), and loss of appetite was observed in 3 PG-PS-treated ewes (*P* = 0.12). None of the ewes experienced changes in incidences of coughing, nasal discharge, or watery eyes.

### 3.4. Progesterone and pregnancy diagnosis

Mean P<sub>4</sub> was lower (*P* < 0.005) in PG-PS-treated (1.35  $\pm$  0.34 ng/mL) compared to control (2.36  $\pm$  0.18 ng/mL) ewes on day 14. Although statistically lower, all treated ewes had physiological concentrations of P<sub>4</sub>

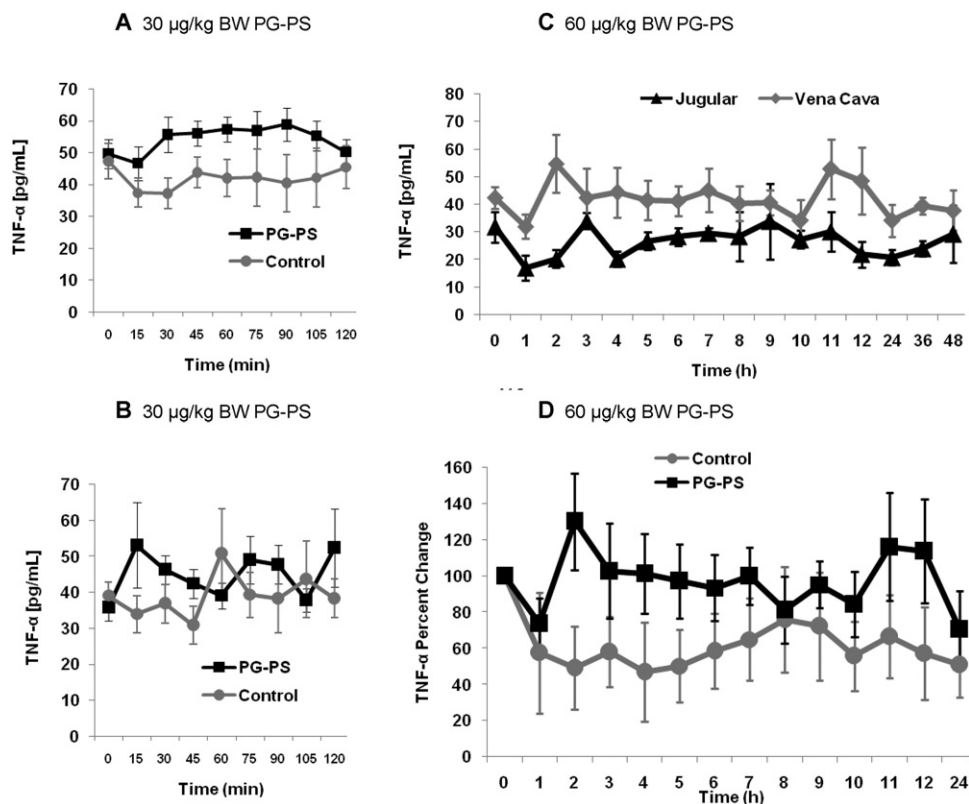


Fig. 1. Concentrations of tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ) in vena cava and jugular vein. Panel A shows increased ( $P = 0.002$ ) concentrations of TNF- $\alpha$  in the vena cava after injection of 30  $\mu\text{g/kg}$  body weight peptidoglycan-polysaccharide (PG-PS) but not ( $P > 0.05$ ) the jugular vein (Panel B). Treatment with 60  $\mu\text{g/kg}$  body weight PG-PS resulted in higher concentrations of TNF- $\alpha$  in vena cava ( $P = 0.003$ ) than in the jugular vein (Panel C). Panel D shows effect ( $P = 0.006$ ) of PG-PS on TNF- $\alpha$  in jugular measured as percentage of hour 0.

indicative of an active CL (Fig. 4A). However, on day 21, concentrations of  $P_4$  in the ewes treated with 60  $\mu\text{g/kg}$  BW PG-PS were indicative of regressing or

regressed CL ( $0.63 \pm 0.13$  ng/mL) as compared to the maintained CL in controls ( $2.33 \pm 0.17$  ng/mL, Fig. 4A,  $P < 0.001$ ). Very low  $P_4$  concentrations in all

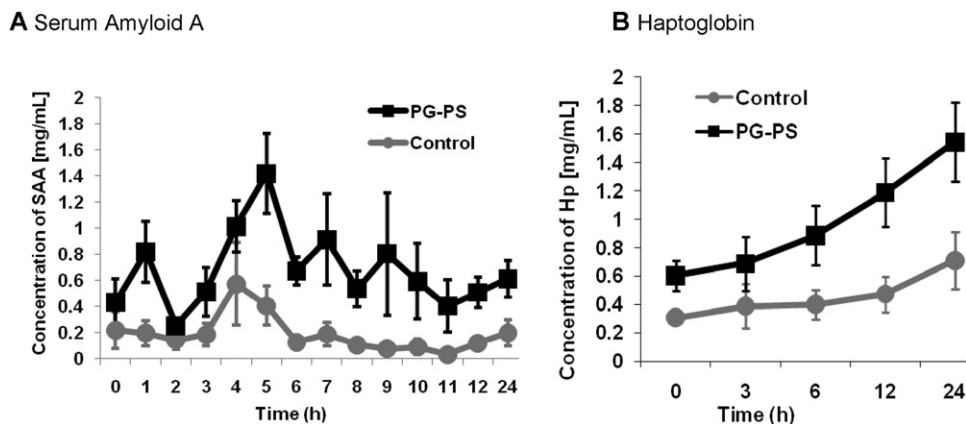


Fig. 2. Serum concentrations of acute-phase proteins. Treatment with 60  $\mu\text{g/kg}$  body weight peptidoglycan-polysaccharide increased ( $P = 0.001$ ) concentrations of serum amyloid A (SAA, Panel A) and haptoglobin (Hp,  $P = 0.003$ , Panel B).

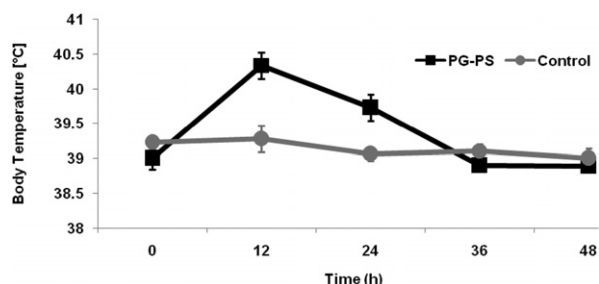


Fig. 3. Body temperature. Body temperature in peptidoglycan-polysaccharide-treated ewes ( $n = 10$ ) increased compared to control ( $n = 10$ ) ewes (treatment,  $P = 0.016$ ; time,  $P < 0.001$ ; and interaction of treatment and time,  $P < 0.001$ ).

PG-PS-treated ewes ( $\leq 1$  ng/mL) on day 21, implied a zero pregnancy rate (Fig. 4B). In contrast, all control ewes had sustained or showed increased  $P_4$  (range 1.4 to 3.3 ng/mL) on day 21 (Fig. 4B,  $P < 0.05$ ), indicating a 100% pregnancy rate. Evidence of embryonic tissue or embryonic membranes was detected on day 21 in 50% (5/10) of the treated group and 88.9% in controls (8/9 ewes, Fig. 4B;  $P = 0.09$ ). At this early stage, viability of embryos measured by ultrasonic heart beat was not observable.

### 3.5. Prediction model

Logistic regression indicated a relationship between concentrations of Hp ( $P = 0.003$ ) and TNF- $\alpha$  ( $P = 0.016$ ) on day 5 and of  $P_4$  on day 14 ( $P = 0.004$ ) and success of pregnancy on day 21.

## 4. Discussion

Immune and endocrine systems interact multiple times to establish pregnancy in mammals. For instance, an inflammatory response to semen occurs on the day of mating and is characterized by massive inflammatory leukocyte infiltration and heightened cytokine gene expression in the uterus [13]. Ironically, after opsonizing the bacterial pathogens after mating, the immune system switches to downplay its defense mechanisms for the duration of early pregnancy until maternal recognition, implantation, and establishment of pregnancy. However, unexpected inflammatory insults during early pregnancy, for example acute mastitis, can compromise reproductive success in cows and sheep [1,6,14–16]. To mimic inflammatory response to mastitis in early pregnant cows, PG-PS was injected in early pregnant sheep (day 5 after mating), and immune factors were examined for their potential to interfere with establishment of pregnancy. A systemic immune response was evident, as treated ewes showed fever, associated behavioral changes, vaginal discharge, and increased concentrations of TNF- $\alpha$ , SAA, and Hp on the day of the challenge.

Serum amyloid A is used as a biomarker of infection, inflammation, and trauma in many species, including ruminants [17,18]. Increased circulating concentrations of Hp were measured in ewes that had intrauterine infection [19]. Challenge with endotoxin (LPS), a component of gram-negative bacteria, stimulated liver macrophages to secrete TNF $\alpha$ , interleukin (IL) IL-1, and

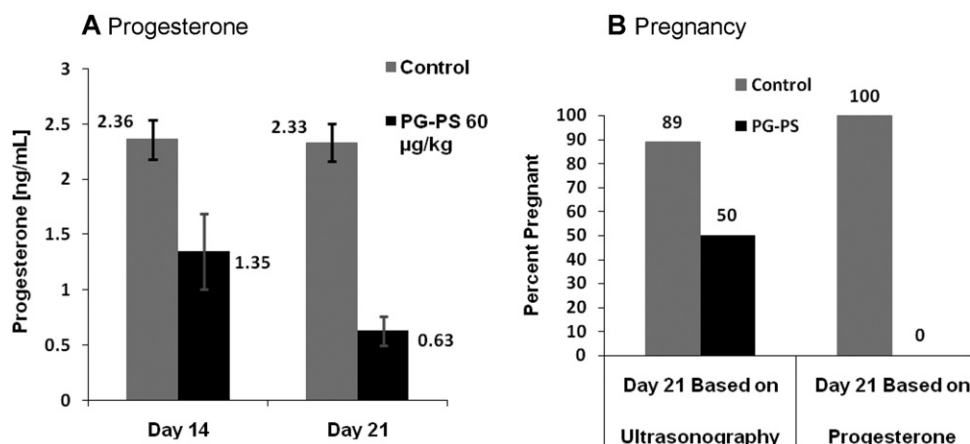


Fig. 4. Pregnancy determination. Concentrations of plasma progesterone ( $P_4$ ) on days 14 and 21 after mating (Panel A). One control ewe was excluded because on day 21 she was diagnosed with pulmonary infection. Peptidoglycan-polysaccharide (PG-PS) decreased  $P_4$  concentration on both days ( $P = 0.005$  and  $P < 0.001$ , respectively). By ultrasonographic diagnosis of embryonic tissues or embryonic membranes on day 21 (Panel B), 50% of PG-PS ewes and 88.9% of control ewes were pregnant ( $P = 0.09$ ). Based on  $P_4$  concentration on day 21, all control ewes but no PG-PS ewes were pregnant.



IL-6, which then induced hepatocytes to synthesize and secrete SAA and Hp [20]. Although PG-PS binds to different toll-like receptors (TLR 2 and TLR 6) [21] on macrophages than LPS (TLR 4) [22], the PG-PS binding leads to activation of nuclear factor  $\kappa$ B (NF- $\kappa$ B) and, subsequently, secretion of inflammatory cytokines [23]. Ewes treated with PG-PS had sustained, increased concentrations of TNF- $\alpha$ , and 5-fold and 3-fold increases in SAA and Hp within 1 and 6 h, respectively. Haptoglobin has bacteriostatic properties and antagonizes TNF- $\alpha$  to decrease inflammation [24], thus creating a negative feedback loop. In vitro, Hp, one of many proteins secreted by the oviductal epithelium that form a protective protein coat around the blastocyst in the rabbit [25], antagonized host immune response to LPS by suppressing production of TNF- $\alpha$  in monocytes. Possibly, a first step in establishing early pregnancy after the bacterial challenge is masking the allogenic embryo with maternal proteins [26], in particular, enhanced secretion of Hp, in an attempt to protect the embryo from uterine macrophages and mast cells.

Results of the present experiment show increasing concentrations of SAA (marker of inflammation), TNF- $\alpha$  (pro-inflammatory cytokine), as well as Hp (anti-inflammatory agent) after PG-PS challenge. Infection following mastitis, which leads to increases in SAA and Hp [27,28], interferes with establishment of pregnancy in dairy cattle [1]. Failure to continue pregnancy after bacterial challenge could be through (a) direct effects of the maternal inflammatory mediators on the embryo or (b) an indirect effect via the endocrine system. Maternal, but not fetal, factors [29] resulted in embryonic death in an LPS-hyporesponsive strain of mice. Challenges with LPS activated macrophages and natural killer (NK) cells to synergistically produce large amounts of TNF- $\alpha$  local to the embryo [5,30–32]. In vitro, addition of TNF- $\alpha$  to the cultures of mouse [33] and cow [34] blastocysts inhibited their development. In the present study, production of TNF- $\alpha$  in the reproductive tract, presumably reflected by higher concentrations in the posterior vena cava compared to the jugular vein after PG-PS treatment, could have interfered with the establishment of pregnancy by acting through toll-like receptors to directly promote embryonic death [35].

Alternatively, modified maternal conditions, such as endocrine or metabolic functions, could affect establishment of pregnancy. Specifically, bacterial-induced immune challenge could interfere with the function of the CL or result in failure of maternal recognition of pregnancy, which also eventually leads to compromised CL function. Trophoblastic interferon (IFN- $\tau$ )

acts as the anti-luteolysin and maternal recognition of pregnancy factor in ruminants and has antiviral, anti-proliferative, and immunomodulatory effects [36,37]. The mRNA for IFN- $\tau$  is detectable as the blastocyst hatches from the zona pellucida [38] and reaches its peak in the ewe on day 13.

Progesterone plays a large role in the “switch” of the immune system in the uterus [39,40]; progesterone has been described as an immuno-inhibitory hormone because it down-regulates pro-inflammatory immune activities. Progesterone administered twice daily to both ovariectomized and intact postpartum ewes before intrauterine inoculation with bacteria suppressed uterine immunity [41]. In Exp 2 of the present study, when compared to controls, concentration of P<sub>4</sub> shortly after the time of maternal recognition of pregnancy (day 14) was lower in PG-PS-treated ewes. Although the concentration of P<sub>4</sub> was physiologically sufficient (>1 ng/mL) to maintain pregnancy, luteal function was obviously compromised. Furthermore, using logistic regression, the concentration of P<sub>4</sub> on day 14 was a significant predictor of pregnancy success. On day 21, concentration of P<sub>4</sub> was even lower (< 1 ng/mL) in PG-PS-treated ewes, indicating that the CLs were regressing, if they were not already regressed. Therefore, the gradually decreasing CL function was a result of unsuccessful maternal recognition of pregnancy and not the cause of the embryonic death. A secondary indicator of pregnancy success was ultrasonic examination on day 21. Although the proportion of pregnant ewes in the PG-PS group (50%) was not statistically different compared to controls (88.9%), sample size was small for categorical analysis of pregnancy diagnosis, reflected in a low power of the statistical test, yet the difference in pregnancy rates may be quite significant financially, for example for the dairy cow producer. The discrepancy between results for pregnancy diagnosis by concentrations of P<sub>4</sub> compared to ultrasonic observations may be explained by gradual embryonic demise, such as some embryos carried in ewes with P<sub>4</sub> less than 1 ng/mL might be ultrasonically visible, but not viable.

The combination of increased SAA, Hp, and TNF- $\alpha$  on day 5–6 and decreased P<sub>4</sub> on day 14 were significant predictors of pregnancy success on day 21. Hence, both direct and indirect effects on pregnancy success likely were induced. Specifically, elevated local TNF- $\alpha$  might induce apoptosis of trophoblastic cells, thereby causing failure to produce adequate concentrations of IFN- $\tau$  necessary to maintain the CL. This failure would lead to decreased P<sub>4</sub> and ultimately, failure to establish pregnancy.

## 5. Conclusions

Injection of PG-PS into the jugular vein induced an immune reaction as shown by fever, vaginal discharge, and increases in SAA, TNF- $\alpha$ , and Hp on the day of and the day after the challenge. These changes were followed by decreases in progesterone on days 14 and 21. Interference with establishment of early pregnancy in ewes inoculated with PG-PS appears to be from local uterine inflammatory response, as shown by elevated TNF- $\alpha$  in the posterior vena cava.

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